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Division of Corporations

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Enter the omail address for this business entity to be used for future sinual report nuilings. Enter only one email address please.

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LLC REGISTERED AGENT CHANGE TECO GUATEMALA HOLDINGS II, LUC

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Abbreviations:

WS: Waiting send

PL: Polled local

PR: Polled remote

MP: Mailbox print

RP: Report

CP: Completed

FA: Fall

TU: Terminated by user

TS: Terminated by system

G3: Group 3 **EC: Error Correct**

HS: Host send HR: Host receive

MS: Mallbox save

FF: Fax Forward

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. N	ame of the limited liability company: TECO Guate	emala H	oldings 11,	LLC		
				Mailing address of lim (Note: MAY BE PO	nited liability company: OST OFFICE BOX)	
	Tampa, FL 33602			FL 33601		
	03/15/2012		L120000	37012		
3.	Date of filing/registration in Florida	4,		Document number	er	
	Registered Agent and Registered Office shown on the records of the Florida Dept. of State David E. Schwartz Registered Office Address (MUST BE FLORIDA STREET ADDRESS) 702 North Franklin Street		2016 ALL			
	Tampa , F	L 33602	<u>-</u>	AHASS	S S S S S S S S S S S S S S S S S S S	
(b)	Enter name of NEW Registered Agent and/or NEW Registers David M. Nicholson	ed Office no	ldress:		2 A 9 42	
	NEW Registered Office Address:			<u>-</u>		
	702 North Franklin Street	 -		-		
	Tampa , F	_L 33602		_		
the chagent was/w	limited liability company is not organized under the lange or changes are made, the Florida street address owill be identical. Or, in the case of a Florida limited are authorized by an affirmative vote of the members icles of organization or the operating agreement of the	aws of the of the reginability control of the limited	e State of Flistered offic ompany, it inited liability liability cor	e and the business is hereby confirme ty company or as o	s office of the registed that the change(s) otherwise provided i	
Signs	Signature of a member or authorized representative of a member			Printed or typed name of signee		
I here provis the obto mer notifie	thy accept the appointment as registered agent and as ions of all statutes relative to the proper and complet ligations of my position as registered agent as providely reflect a change in the registered office address, and in writing of this change.	gree to ac le perforn led for in I hereby c	t in this cap nance of my Chapter 60. confirm that	oacity. I further as duties, and I am fi 5, F.S. Or, if this o the limited liabili	gree to comply with familiar with and ac document is being fi iy company has bee	
Signati	ure of Registered Agent					